

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT**

Application Number	09/854,101
Filing Date	05/11/2001
First Named Inventor	Lin
Art Unit	2131
Examiner Name	
Attorney Docket Number	

**RECEIVED**

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

MAY 29 2003

Technology Center 2100

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are:

Death of Inventor (See enclosed Petition)

1. ☐ The correspondence address is NOT affected by this withdrawal.  
2. ☒ Change the correspondence address and direct all future correspondence to:

**CORRESPONDENCE ADDRESS**☐ Customer NumberPlace Customer Number  
Bar Code Label Here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mrs. Hung-Yu Lin				
Address	17983 Pueblo Vista Lane				
Address					
City	San Diego	State	CA	Zip	92127
Country					
Telephone				Fax	

- ☒ This request is made on behalf of myself and  
☐ all the attorneys/agents of record.  
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
☒ the attorneys/agents associated with Customer Number

This request is enclosed in triplicate (including any attachments).

Name Daniel Robbins

Signature *Daniel Robbins*

Date 05/22/2003

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# Request for Customer Number Data Change

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To the Commissioner for Patents  
Please record the following data changes to **Customer Number**:

Type Customer Number here



27805  
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PATENT TRADEMARK OFFICE

☒ Please change Address to:

<b>Firm or Individual Name</b>	Daniel Robbins			
<b>Address</b>	381 Savage Farm Drive			
<b>Address</b>				
<b>City</b>	Ithaca	<b>State</b>	NY	<b>Zip</b> 14850
<b>Country</b>				
<b>Telephone</b>	607 257 6184	<b>Fax</b>	607 257 5698	

☐ Please delete the following practitioner registration number(s) from the Customer Number indicated above:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ Please add the following practitioner registration number(s) from the Customer Number above:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ Additional practitioner registration numbers are listed on supplemental sheet(s) attached hereto (PTO/SB124B or equivalent)

**Request Submitted by:** must be a person, e.g. registered practitioner, associated with the customer number shown above)

<b>Firm Name (if applicable)</b>			
<b>Name of Person Submitting request</b>	Daniel Robbins		
<b>Signature</b>	<i>Daniel Robbins</i>		
<b>Telephone Number</b>	858 481 6390	<b>Date</b>	05/22/2003

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This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop EBC, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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